FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

1448 LANTANA DR

FT LAUDERDALE FL 33326-3600

PROFIT CORPORATION ANNUAL REPORT

1997

Principa! Place of Business

FT LAUDERDALE FL 33326

1448 LANTANA DR



FLORIDA DEPARTMENT OF STATE

FILED

Mar 06 1997 8:00am

Secretary of State

Sandra B. Mortham

DOCUMENT # P96000049796 (1)

ROSE GARDEN RETIREMENT HOME, INC.

							3. Date Incorporated or Qualified 3s. Date of Last Report 06/10/1996			
2. Frincipal Place of Business			2a. Mailing Address			4. FEI Number		Ap	pplied For	
21			26			65-0667477		No	ot Applicable	
Suite, Apt #, etc			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	r,		City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28	b			Trust Fund Contribution		Added	to Fees	
7ip 24	Country Zip 25 29			Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
BAHRAMI, MARY					1	Name				
1448 LANTANA DR					82 Street Address (P.O. Box Number is Not Acceptable)					
्र FT L	AUDERDALE FL 33	3326					areas (
				83						
				8	4	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Se	ections 607.0502 and 607	.1508. Florida Statut	es, the abo	ve.	-named cor	rporation submits this statement for the	purpose of	changing it	ts registered
office or r agent. Fa	egistered agent, or bo on familiar with, and a	oth, in the State of Florida ocept the obligations of, t	i. Such change was i Section 607 0505, Fli	authorized I orida Statut	by es.	the corpora	ation's board of directors. I hereby acce	pt the appo	ointment as	regis ter ed
SIGNATURE.	•	,								
- OCHVATORE	Sequence, typical or product of	sear of registered agent and title ra			gen	n: signature requ	ulred when reinstating)	DATE		
12.	าการข	OFFICERS AND DIRECT	ORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND		
THILF	hres sed	THEAT INK	Z. DELETE	1.1 TITLE		1			Change	Addition
NAMI	MITHUY 131	AH MAMI		1.2 NAM	_	Ì				
STREET ADDRESS	1448 LM	MD AVIOR	2 \ 22 /			ADDRESS				
CITY - S1 - ZIP	FT LAUGE	THAMI MANNE OR NOTICE PL	33326	1.4 CITY	*****	- ZIP			Change	Addition
THILE		·	LT DETELL	2 1 TITLE		-			Change	Addition
NAME				2 2 NAM						
STREET ADDRESS						ADDRESS				
City-S1-7IP Tale			DELETE	2 4 C/TY 31 TITLE		1-219	, , , , , , , , , , , , , , , , , , ,		Change	Addition
I NAME	ì		LLI DELL'IL	32 NAM						
STHEET ADDRESS				3 3 STREET ADDRESS		ADDRESS				
DITY- \$1-7-				3 4. CITY						
TITLE			DELETE	4.1 TITLE		1 211			Change	Addition
NAME				4. 2 NAV						_
STREET ADDRESS				4.3 STRE	ET/	ADDRESS				
CITY - \$1 - 202				4.4 CITY	- ST	T-ZIP				
TITLE			DELETE	5.1 TITLE	 E				Change	Addition
NAME				5.2 NAM	E					
STREET ADDRESS				5.3 STRE	ET A	ADDRESS				
G(1Y+\$1+2)P				5.4 CITY	-ST	(-ZIP				
1011			DELETE	6.1 T(TLE	É				Change	Addition
NAME				6.2 NAM	ΙE					
STREET ADDRESS				6.3 STRE	ET A	ADDRESS				
CITY+ST ZIP		79.874 Annie - min ominina manner i ngaramana (F. 1911 i Politicolo)		64 CITY						1111111
informatio	on indicated on this at officer or director of th	nnual report or supplemei	ntal annuat report is iver or trustee empor	true and ac wered to ex-	;çu	rrate and tha	ed in Section 119.07(3)(i), Florida Statut at my signature shall have the same leg ort as required by Chapter 607, Florida	jai effect as	if made un	nder oath; that